Interim Procedure Skills Assessment Form

Candidate: Using the chart below, indicate your *level of comfort* performing each of the procedures listed at the beginning of the CFA. The ranking scale is as follows:

1 = Not confident OR have never performed this procedure.

2 = Minimally confident; have learned and/or performed this, but not recently.

3 = Somewhat confident; have performed this in the recent past.

4 = Very confident; this is something I perform routinely and with skill.

Record the number of times you performed each procedure during the first six weeks of the CFA period. Please add procedures if necessary.

Please sign and date the form and give it to your primary assessor at the beginning of Week 6.

Assessor: Please indicate that you have observed the procedures listed, provide your assessment of the candidate's competence in each procedure, sign below and return to PRA-BC with Interim CFAR report.

Candidate Name: _____

Assessor Name: _____

Procedure	Candidate to complete:		Assessor to complete:			
	Self-ranking week 1	# performed at week 6	Competence Not Demonstrated	Competence Partially Demonstrated	Competence Demonstrated	Not Yet Assessed
Pelvic Examination						
Papanicolou Examination						
Breast Examination						
Rectal exam/Prostate exam						
Suturing of lacerations under local anesthesia						
Removal of sutures/staples						
Wound assessments, debridement and dressings						
Syringing ear wax/removal of ear foreign body						
Wart treatments						
I & D of abscesses						
Identifying eye foreign bodies and treatment or appropriate referral						
Punch biopsies of skin lesions						
Excision of skin lesions						
Sebaceous cyst removal						
Splinting a limb for suspected or confirmed fracture, prior to referral to ER						
Partial/total nail removal						
Removal of foreign body from nose						
Aspirating/injecting a joint						
Other procedures (please list below):						
•						
•						
•						
•						
•						
•						
•						

Assessor comments:

Candidate comments:

_____ _____

Candidate Signature Date Assessor Signature Date

SAMPLE ONLY